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ABSTRACT

This profile describes the characteristics of day care providers and federally supported day care settings in Washington State. The report evaluates the quality of child care services and the impact of the Federal Interagency Day Care Requirements (FIDCR) both from the perspective of the state and local agencies which must administer federal day care dollars and from the perspective of day care operators who must meet federal standards. Statistics are provided on the three major types of licensed or certified day care settings which receive federal funds in Washington State: Day Care Centers, Family and Group Day Care Homes, and In-Home Care settings. The Washington State day care services profile provides data on: (1) the characteristics of children served by day care, (2) the day care services offered (health and psychological, social services, transportation), (3) a description of day care providers (previous education, training, work experience), (4) providers' working conditions (staff/child ratios, training opportunities, working hours and benefits), and (5) parent involvement. It is hoped that this data will provide a baseline for upgrading services in Washington State. A total of 33 tables and charts supplements the text. (CS)

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A PROFILE OF FEDERALLY SUPPORTED DAY CARE IN WASHINGTON STATE

CONTRACT NO.
RX74-15-HEW

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DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
REGION X

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November 15, 1974

Mr. John Crossman, Project Officer
Region X Dept. of Health, Education
and Welfare
Arcade Plaza Building, M.S. 610
1321 Second Avenue
Seattle, WA 98101

Dear Mr. Crossman:

RE: Contract No. RX74-15-HEW, RXDCS Supplement

UNCO, Inc. is pleased to submit these state profiles of Federally supported day care settings, provider characteristics and consumer relations as the second major product of the Region X day care evaluation effort begun in July of 1972. The thirty-three tables included in the profiles for each state were initially presented with Regionally aggregated data in Volume Three of the major study. As a part of the continuing effort to meet the day care needs of the states' citizens with quality day care, these data have been presented for each state as a baseline for upgrading services.

The UNCO project staff would like to express the pleasure it had in working with the staff of the DHEW Region X office and to commend the Regional office approach of maximizing the use of data made available during the initial, expensive data collection effort.

Sincerely,

Elizabeth L. Diffendal
Manager, Northwest Programs

fm

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09007

A PROFILE OF FEDERALLY SUPPORTED DAY CARE IN WASHINGTON STATE

1.0 INTRODUCTION

This State profile of Federally supported child care services is another product of the major evaluation of child care in Region X, contracted by the Federal Regional Council in 1972-73. The study evaluated Federally supported child care available in the states of Washington, Oregon, Idaho and Alaska. The quality of care and the impact of the Federal Interagency Day Care Requirements (FIDCR) were examined both from the perspective of the state and local agencies which administer Federal day care dollars, and from the perspective of day care operators who must meet Federal standards. The full three volume report on the study is available through the National Technical Information Services, U.S. Department of Commerce, Springfield, Virginia, 22151. The accession number for Volume One is PB 221 453, Volume Two is PB 221 454, and Volume Three is PB 221 455. The cost is $3.00 per volume and $9.00 for the complete set.

This special profile report is a breakdown, by state, of information which was included for the Region as a whole in Volume Three of the original study. The charts and tables in this report develop a profile of the characteristics of day care providers and of Federally supported day care settings in Washington State.

Several national actions have occurred in the area of day care since the major study was completed in March, 1973:

-- The minimum wage was extended to day care providers, resulting in a cutback or total withdrawal of state and Federal funding for in-home day care by many states due to the increased payments required. An examination of parents' use of in-home care, as displayed in the tables of this profile, reveals potentially serious consumer inconvenience resulting from the loss of this type of care.

-- The national Child Development Associate program has continued to grow and to stimulate discussion on the likely shape of the day care profession in the future. The sections of this profile displaying day care operators' current levels of experience and formal training in child development or early childhood education provide a baseline for understanding the current situation in Washington State.

-- The debate continues over the competing views of day care as a primary, developmental service to children and an appropriate vehicle for delivering a full range of health and social services versus the more circumscribed view of day care as a secondary or support service to parental employment. The national Office of Child Development is currently contracting for a national day care consumer survey to find out what parents' expectations and preferences are in the area of day care. The data in this state profile preview some of what that national survey may reveal about parent needs and problems.

In Region X, the Federal Regional Council has adopted an action plan to improve the quality of Federally supported day care, based on the recommendations made in the day care evaluation study. As a part of this plan, the Day Care Subcommittee of the Federal Regional Council, which includes representatives of the four states in the Region, has worked with UNCO to develop a monitoring guide for the 1968 FIDCR. The guide is complete, and the Region is beginning a cooperative process with each of the states to develop a state plan for improving Federally supported day care services. The data presented in this profile provide a baseline describing the current state of provider training, parent involvement, and the range of required services which are being provided by operators in Washington State.

It is hoped that as the states in the Region plan for day care services and prepare annual budgets, these data will be useful as empirical backup material.

1.1 DAY CARE SETTINGS

There are three major types of licensed or certified day care settings which receive Federal funds in Washington State--day care centers, family and group day care homes, and care provided in a child's own home or in the home of a relative. The FIDCR describe these types of care as follows:

Day Care Centers. Any place that receives groups of 13 or more children for day care. It may use subgroups on the basis of age and special need, but provides opportunities for the experience and learning that accompanies a mixing of ages. Centers do not usually attempt to simulate family living. Centers may be established in a variety of places: private dwellings, settlement houses, schools, churches, social centers, public housing units, special facilities.

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Family Day Care Home. An occupied residence in which a person regularly provides day care for six or fewer children including the caregiver's own children and others not related by blood or marriage. It is especially suitable for infants, toddlers, sibling groups and for neighborhood-based day care programs including those for children needing after-school care.

Group Day Care Home. An extended or modified residence in which day care is regularly provided for seven to 12 children including the caregivers own children and others not related by blood or marriage. It uses one or several employees. It is suitable for children who need before- and after-school care, who do not require a great deal of individual attention and who can profit from considerable association with their peers.

In-Home Care*. Child care services provided in the child's own home, or in another person's home, where all of the children cared for are from one family.

1.1.1 Day Care Centers

Twenty-four day care centers serving Federally funded children were randomly selected for study in the State of Washington. Of these, one quarter were proprietary or private, for-profit centers, another half were centers which were sponsored by a private, non-profit organization such as a church, a non-profit day care corporation, or a community service agency. Twenty-five percent of the centers were run by public agencies and were funded almost totally with public monies. A subset of these were the Head Start affiliate programs which comprised 8% of the sample Table 1.1).

1.1.2 The Effect of Sponsor Type on a Day Care Center Program

The availability of Federal monies for child care has not reduced private-profit operators' costs since they are not eligible for many of the direct Federal reimbursements, grants and other benefits of non-profit status. Private profit center programs tend to be geared to middle income families whose health, nutritional and educational needs

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*Draft 1972 FIDC Requirements.

TABLE 1.1
GENERAL CHARACTERISTICS OF DAY CARE CENTERS CURRENTLY RECEIVING FEDERAL FUNDS IN WASHINGTON

	Percent of Centers (n=24)
Center Type	
Private profit	25%
Private non-profit	50%
Public	17%
Head Start affiliate	8%
Center Sizes (Licensed Capacity)	
Up to 30 children	20%
31 to 60 children	50%
More than 60 children	30%
City Size	
Area of 2500 or less population	4%
2500 to 50,000	48%
50,000 to 250,000	13%
250,000 plus	35%
Location	
Urban residential	57%
Industrial	0
Commercial	4%
Suburban residential	13%
Rural area	26%

Federally Funded Children as Percent of Total Children Enrolled

Percent of Federally Funded Children	Percent of Centers (n=24)
Up to 20%	46%
20 to 39%	8%
40 to 59%	8%
60 to 79%	0
80 to 100%	39%

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are different from the lower income families served primarily in more heavily subsidized public programs. Since meeting health and social service needs costs so much, private-profit centers rarely provide any of these support services, and usually must make a number of staffing compromises simply to break even. As Table 1.2 shows, a total of 22% of the day care center facilities sampled in Washington State were owned by the operator or another private party. These are the private, for-profit centers. The Regional profile, which included a larger sample of all sponsor types, revealed that 78% of all private-profit centers paid a considerable rental or mortgage payment for their center each month, while 36% of the non-profit centers and 29% of the public centers operated in donated space. There is no difference in the amount of State payments which the three sponsor types receive per child per day. Therefore, generally, a larger part of a private center's income is spent for facility payments and other overhead costs than in non-profit or public centers.

Since September of 1969, Federal matching funds to cover some start up costs have been available to private, non-profit organizations through amendments to the Social Security Act. Department of Agriculture food reimbursement monies are available to non-profit sponsors, although a large number of them have not begun to take advantage of these sources.

Public centers are sponsored by a variety of public agencies or organizations. Sponsors of public day care centers sampled in Washington State included state universities, Community Action Agencies and Model Cities programs. These are not the only centers which receive public funds; however, publicly sponsored programs usually receive most of their funds from state and Federal government and are able to provide a considerably wider range of support services than do private or most non-profit centers.

Partly because of the geographic location of many private centers and because of the upper income limits for enrollment in public centers, center enrollments frequently reflect economic segregation. In Washington State, fewer than 20% of the children in 46% of the centers were Federally subsidized, while in 39% of the centers, more than 80% were Federally subsidized (Table 1.1). The Regional profile reveals that those with fewest Federally-subsidized children are the for-profit centers--60% of private, non-profit centers had fewer than 20% Federally funded children--, while many of the non-profit and public centers served almost all Federally-funded children--27% of the non-profit and 77% of the public centers had enrollments of 80 to 100% Federally-funded children.

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TABLE 1.2
FACILITY OWNERSHIP BY SPONSOR TYPE
WASHINGTON

Owned By	Percent of Centers (n=23)
Religious Organization	57%
Non-profit Community Organization (YMCA, etc.)	9%
Hospital	0
Housing Authority	4%
Other City/County/State Agency	9%
Business or Industry	0
Operator Owned	9%
Other Private Party	13%

TABLE 1.3
MONTHLY SPACE LEASE/MORTGAGE ARRANGEMENTS
WASHINGTON

Lease/Mortgage Arrangement	Percent of Centers (n=23)
Rental/Mortgage Payment Full Cost	44%
Rental/Mortgage Payment Partial Cost	17%
Donated Space	30%
Other	9%

1.1.3 Day Care Homes

Day care homes probably serve more pre-school children than any other day care arrangement. They also frequently serve the school-age brothers and sisters of these pre-schoolers. In Washington State, the average number of children cared for in a family day care home is 4.2. The Regional average is 3.8 (Table 1.4). Sixty-two percent of the family day care homes sampled in Washington were located in areas with 2500 or less population, reflecting the importance of day care homes as a source of care in small towns and rural areas.

1.1.4 In-Home Care

The majority of in-home providers are located by the parents themselves, and frequently are relatives or acquaintances. In-home care may be provided in the child's own home--62% in Washington State--or in the home of the provider--38% in Washington (Table 1.5). However, the distinguishing feature of in-home care is that the providers care for the children from one family only. The average number of children per in-home caregiver in Washington is 2.5. The Regional average is 2.6. Seventy-one percent of the in-home settings sampled in Washington State were in areas with fewer than 2500 people, again reflecting the importance of home care in areas of low population density.

1.2 CHARACTERISTICS OF CHILDREN SERVED IN CENTERS, HOMES AND IN-HOME CARE SETTINGS

1.2.1 Children Served by Centers

The largest number of children in any one age group served by the centers sampled in Washington State are children from three years old through enrollment in the first grade. Seventy-one percent of all children in day care centers were in this age group (Table 1.6). Very few infants and school-age children receive center care in Washington, or in any state in the Region. Although five of the 23 centers sampled in Washington served at least one infant (Table 1.7), infants made up only 4% of the total population of all of the centers. Nine of the 23 centers served at least one school-aged child, but children six and over made up only 8% of the total centers' population.

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TABLE 1.4
GENERAL CHARACTERISTICS OF FAMILY DAY CARE HOMES
RECEIVING FEDERAL FUNDS IN
WASHINGTON

Size (Licensed Capacity)	
Average number of children per home	4.2
City Size	
Up to 2500	62%
2500 to 50,000	5%
50,000 to 250,000	21%
250,000 or more	12%
Total children in care in 130 homes	555

TABLE 1.5
GENERAL CHARACTERISTICS OF IN-HOME CARE SERVICES
RECEIVING FEDERAL FUNDS IN
WASHINGTON

Size	
Average number of children per home	2.5
City Size of Location	
Up to 2500	71%
2500 to 50,000	27%
50,000 to 250,000	0
250,000 or more	2%
Place Care is Provided	
Child's home	62%
Provider's home	38%
Total children in care in 112 homes	284

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TABLE 1.6
ACTUAL NUMBER AND PERCENT OF CHILDREN IN CARE
BY
AGE GROUP AND TYPE OF CARE SAMPLED

Age of Children in Care	Centers (n= 23)		Family Day Care (n=130)		In-Home (n=112)		Total Number of Children in Care By Age
	No.	Percent	No.	Percent	No.	Percent	
Infants (0-18 months)	45	4%	53	10%	20	7%	118
Toddlers (19-35 months)	203	17%	122	22%	35	12%	360
Pre-school (3 years-1st grade)	860	71%	190	34%	105	37%	1155
School age (1st grade-14 years)	93	8%	190	34%	124	44%	407
TOTAL	1201	100%	555	100%	284	100%	2040

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TABLE 1.7
PERCENT OF CHILD CARE FACILITIES WHICH CURRENTLY ENROLL INFANTS, TODDLERS, PRE-SCHOOL AND SCHOOL-AGE CHILDREN

Age of Children in Care	Percent of Providers Who Care for One or More Children in the Age Group		
	Centers (n=23)	Family Day Care (n=100)	In-Home Care (n=112)
Infants (0-18 months)	22%	34%	15%
Toddlers (19-35 months)	65%	65%	25%
Pre-school (3 years-1st grade)	91%	81%	32%
School age (1st grade-14 years)	39%	53%	46%

Another category of children who rarely are cared for in day care centers are the physically handicapped or emotionally disturbed. One-tenth of 1% of all children in the day care centers sampled in Washington had a physical handicap, while 3% were described as emotionally disturbed by center directors (Table 1.8). This closely reflects the Regional average for centers. Only one of all of the day care centers sampled in Washington serves a physically handicapped child, while eight served at least one child with an emotional disturbance (Table 1.9).

The children of migrant farm workers and other bilingual children are served in slightly larger proportion in Washington State's day care centers than the Regional average. Sixteen percent of the children in the centers sampled were from migrant farm workers' families, as compared with 7% in the Region as a whole (Table 1.8). The children of migrant workers appeared almost entirely in Eastern Washington centers supported largely with public funds. Bilingual children or children who spoke only a foreign language were found in 22% of the centers (Table 1.9), and composed 10% of the total center population sampled, as compared with 5% of the center population of the Region as a whole. Again, this primarily reflects the migrant centers in Eastern Washington.

1.2.2 Children Served in Family Day Care Homes

The 130 family day care homes sampled in Washington served a larger proportion of infants, toddlers and school-aged children than did Washington centers. Ten percent of the population of family day care homes were infants under 18 months old (Table 1.6), closely reflecting the Regional average of 9%. Given the current interest in infant care and some of the empirical results which have come from research, the care setting which meets an infant's developmental needs best should have a small group of children of various ages. In addition, the staff should provide stable (low turnover), warm, one-to-one relationships with the infants. In general, day care homes offer more good infant care features than centers and certainly at less expense than centers. At a one-to-four staff ratio, experts estimate the cost of infant center care at $2500 per child per year.

Toddlers, aged 19 to 35 months old, comprise 22% of Washington's day care home population (Table 1.6), slightly less than the Regional average of 25% for homes. The family day care setting provides care for a larger proportion of toddlers than any of the other care settings both in Washington and in the Region as a whole.

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TABLE 1.8
ACTUAL NUMBER AND PERCENT OF TOTAL CHILDREN IN CARE WHO HAVE SPECIAL NEEDS, BY TYPE OF SETTING

Special Interest Type	Centers (n=1201)		Family Day Care Homes (n=555)	
	No.	Percent	No.	Percent
Physically handicapped	1	0.1%	3	0.5%
Emotionally disturbed	33	3.0%	8	1.0%
Migrant farm workers	193	16.0%	0	0
Bilingual or foreign language speaking children	123	10.0%	2	0.3%
TOTAL	350	29.0%	13	1.8%

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TABLE 1.9
PERCENT OF SAMPLED CHILD CARE FACILITIES, OTHER THAN IN-HOME, WHICH CURRENTLY ENROLL CHILDREN WITH SPECIAL NEEDS

Special Interest Type	Percent of Providers Who Care for One or More Children With Special Needs	
	Centers (n=23)	Family Day Care (n=130)
Physically handicapped	4%	2%
Emotionally disturbed	35%	6%
Migrant farm workers	17%	0
Bilingual or foreign language speaking children	22%	2%

Children aged three years to enrollment in the first grade comprised 34% of the family day care home population--37% less than their representation in centers (Table 1.6). School-age children accounted for 34% of the population of family day care homes, slightly higher than their 28% representation in the Region as a whole (Table 1.6). The primary difference between the population served in centers and that served by family day care homes is the much greater proportion of school-age children served in the homes--34% as compared with 8% served in centers. This proportion is roughly the same in all of the states except Alaska where about 20% of the centers' population are school-aged children. As discussed earlier, family day care providers frequently care for the school-aged siblings of pre-schoolers in care. They are often located near the children's homes and offer a convenient, home-like setting for before- and after-school care of young school-age children.

The percent of physically handicapped and emotionally disturbed children in Washington's family day care homes is even lower than their representation in the centers. Only one-half of 1% of the 555 children in the homes sampled had a physical handicap, while only 1% of these children were identified as having an emotional disturbance (Table 1.9). The representation of these children in homes in the other states is in the same proportion.

In the 130 family day care homes there was not one child from a migrant farm worker family and only two children of the 555 were bilingual or spoke a foreign language, reflecting the Regional average for family day care homes (Table 1.8).

1.2.3 Children Served in In-home Care Settings

In the 112 in-home care settings sampled in Washington, the largest population of children in care were school-aged children. Forty-four percent of all children in in-home care were school aged (Table 1.6). This same predominance of school-aged children was found in the rest of the Region. The number of infants cared for in-home in Washington (7%) was slightly fewer than the average for the Region (11%).

Toddlers, aged 19 to 35 months, made up 12% of the in-home population (Table 1.6), the same as the Regional average. Fewer toddlers were cared for in in-home settings than in family day care in all of the states of Region X.

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Thirty-seven percent of the children in care in in-home settings in Washington are between the ages of three and enrollment in the first grade; again, about one-half of the proportion of this age group that is found in center care (Table 1.6).

In conclusion, the profile of day care use by children of various ages in Washington is as follows:

-- Family day care homes provide a larger proportion of care for infants and toddlers than any other day care setting.

-- Day care center populations have about twice the proportion of children aged three to enrollment in the first grade than either form of home care.

-- In-home settings provide a larger proportion of care for school-aged children than either family day care homes or centers.

1.3 SERVICES OFFERED BY CENTERS, HOMES AND IN-HOME PROVIDERS

No one setting or program can meet all of the child care needs of individuals in Washington. Care needs vary with the economic and work situation of parents and with the physical and psychological needs of individual children. There are special care needs of handicapped or ill children, seasonal, extended-hour needs of agricultural or cannery workers, and needs for supervision of school-aged children.

1.3.1 Day Care Centers

Of the 23 centers sampled in Washington, 100% offer full day care for children (Table 1.10). Since full day center hours are tailored primarily to parents' daytime work schedules, 91% of the centers open before 8:00 a.m. and 87% of them close at 5:00 p.m. or later (Table 1.11). Only 4% of the centers are open in the evening until 9:00 p.m., none offer overnight or weekend care, and only three centers offer care on holidays. Therefore, those parents with evening or night employment, or jobs which require them to work on weekends or holidays, do not have center care available as a satisfactory day care option.

None of the 23 centers sampled offer drop-in care (Table 1.10). This lack of any drop-in care is in marked contrast

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TABLE 1.10
COMPARISON OF SERVICE FEATURES OF
THE MAJOR TYPES OF CARE

Types of Care Offered	Percent of Federally Funded Settings Sampled Which Offer the Care		
	Centers (n=23)	Family Day Care Homes (n=123)	In-Home Care (n=96)
Full Day	100%	94%	*
Half Day	61%	48%	*
Drop-In	0	45%	*
Before School	48%	50%	*
After School	57%	64%	*
Overnight	0	3%	6%
Weekends			
Occasionally	0	25%	29%
Regularly	0	10%	14%
Ill Children	0	69%	Always
Evenings	4%	13%	19%
Holidays	13%	20%	43%

*All types offered, depending on age of children and parent situation.

TABLE 1.11
ACTUAL HOURS THAT EACH TYPE OF DAY CARE SETTING IS OPEN TO CARE FOR CHILDREN

Hours	Centers (n=23)	Family Day Care Homes (n=123)	In-Home Care (n=96)
Time Facility Opens:			
Before 6:00 a.m.	13%	0	5%
6:00 - 6:45	35%	15%	10%
7:00 - 7:45	43%	52%	34%
8:00 - 8:45	9%	21%	24%
9:00 a.m. & after	0	12%	26%
Total	100%	100%	99%
Time Facility Closes:			
Before 4:00 p.m.	4%	6%	19%
4:00 - 4:45	9%	10%	10%
5:00 - 5:45	13%	40%	34%
6:00 - 6:45	70%	31%	19%
7:00 - 7:45	0	4%	2%
8:00 - 9:00	4%	9%	17%
Overnight Care	0	3%	6%
Total	100%	100%*	100%*

*Total does not include overnight care.

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to the situation in the other states in Region X. An average of 45% of the centers in Oregon, Idaho and Alaska offer this service. However, this type of unpredictable care is particularly hard for centers to support since their staffing depends on the number of children present at any one time and since their monthly overhead expenses for the facilities remain the same, despite the number of children who are served. Therefore, in order to maximize the use of center space and staff, many centers will accept only full or regular, half-time children.

None of the centers in Washington or in the Region as a whole, accept ill children for care. This means that working parents whose child becomes ill must either make other arrangements or remain home from work (Table 1.10).

1.3.2 Family Day Care Homes

Ninety-four percent of the 123 family day care homes sampled in Washington offer full day care for children (Table 1.11). Many family day care homes offer care at different hours than do centers. Thirty-three percent of the family day care homes open for care at 8:00 a.m. or later and 13% provide evening care. Three percent of the homes offer overnight care; 25% occasionally provide weekend care; 10% regularly provide weekend care and 20% provide care on holidays. Therefore, the family day care setting can and does accommodate a much wider range of parent working hours than does the center.

Forty-five percent of family day care providers in the Washington sample offer drop-in care for parents with unpredictable or irregular needs for care (Table 1.11). This is a higher percentage of homes than the Regional average of 32%, and is in marked contrast to the centers which offer no drop-in care.

A striking and important difference for working parents between center and family day care home service features is the 69% of family day care providers who offer care for ill children in contrast to none of the centers (Table 1.11). This feature means that for most routine childhood illnesses, the working parent(s) can depend upon the regular day care situation to provide care for the child.

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1.3.3 In-Home Care

In-home providers in Washington offer care at all hours under a variety of arrangements for the children of one family. The hours during which they provide care reflect a wide range of parent work and training schedules. Twenty-six percent of the 96 in-home providers sampled in Washington begin work at 9:00 a.m. or later and 19% finish work before 4:00 p.m. (Table 1.12). Nineteen percent of the in-home providers provide care during the evening and 6% offer overnight care--the highest proportion of any other type of care. The in-home setting is, of course, the most convenient for overnight care since the children usually can stay in their own home and in their own beds.

Forty-three percent of the in-home providers either regularly or occasionally provide care on weekends, somewhat less than the Regional average of 52%. Like family day care, in-home care provides a great deal more flexibility than center care. All in-home providers interviewed said that they provide care for ill children, and 43% provide care on holidays--the largest proportion for any type of care.

1.4 OTHER SERVICES OFFERED BY CENTERS

1.4.1 Health and Psychological Services

Although Table 1.12 indicates that a variety of health and psychological services are provided by Washington's day care centers, it would be more accurate to say that the centers arrange for the provision of most of the services. For example, no private or public center provides emergency care other than basic first aid, but 83% of the centers have specific, pre-planned arrangements for a child to be taken to a source of emergency care. Some public or Head Start affiliated centers may pay for this emergency care for low income enrollees. In those instances where preventive and diagnostic services are offered, the center rarely pays for the services, but arranges for a public health nurse, private volunteer or staff member to provide the services. Dental, psychiatric or medical care which involves unpredictable and unfixed costs cannot be built into a program which operates only on reasonable parent fees. The Regional profile revealed that with few exceptions, private-profit day care centers did not arrange for any health care other than emergency care. The centers which arranged for diagnostic and preventive

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TABLE 1.12
HEALTH AND PSYCHOLOGICAL SERVICES PROVIDED BY DAY CARE CENTERS RECEIVING FEDERAL FUNDS

Type of Service	Percent of Centers Providing the Services (n=23)
General Physical Checkup	22%
Diagnostic Testing (e.g. hearing, sight)	52%
Innoculations & Immunizations	22%
Emergency Care	83%
Other Medical Treatment	4%
Psychological Assessment	22%
Dental Examination	30%
Dental Treatment	13%
Psychiatric Care	4%

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services and paid for some treatment were exclusively public and private non-profit centers which had considerable public funding in addition to the state per capita day care fees. In general, also, these centers are more closely tied to other community services such as community clinics, community mental health centers, etc. than are the private centers.

F.4.2 Social Services to the Family

Only 4% of the Washington centers had a part-time social worker to provide services to the families of children in care (Table 1.13). This is not significantly less than the Regional average of 7%. In 65% of the centers, the center director had responsibility for whatever social work services were provided which, in most instances consisted mainly of referring parents to other community resources which they may need. Only 52% of the centers serving Federally funded children (slightly lower than the Regional average of 62%) provided such referrals to parents of children with behavioral or learning problems. Twenty-two percent of the center directors said that they had not assigned anyone on staff a responsibility for social services. The Regional profile revealed that private, for-profit center directors generally felt that they were not responsible for the provision of social services as a part of the normal responsibilities of providing child care. The majority of centers which had a part-time social worker in the Region as a whole were public centers, most frequently Head Start affiliates.

Each center director was asked what he/she thought a day care center's responsibility should be regarding social services for families of the children in care. The following were a few of the responses from Washington directors:

> "None, everytime we have tried to make suggestions in the past, parents would remove their children from the center." (Private, for-profit center)
>
> "A lot--we try to do a lot." (YWCA based, private, non-profit center)
>
> "This should not be mandatory for centers...but we try to help parents with child rearing and help to resolve conflicts." (Church-based, private, non-profit center)

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TABLE 1.13
RESPONSIBILITY FOR SOCIAL SERVICES
IN DAY CARE CENTERS

	Centers (n=23)
Center Director	65%
Part-time Social Worker	4%
Other	9%
No formal responsibility assigned	22%
Percent of centers which provide referral services to parents whose children may have behavioral or learning problems which require professional attention.	52%

TABLE 1.14
PERCENT OF CENTERS WHICH PROVIDE TRANSPORTATION
TO AND FROM THE CHILD'S HOME OR SCHOOL

	Centers (n=24)
Center provides transportation for all enrolled children.	17%
Center provides transportation for those who need it.	9%

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> "100% within the capabilities of resources in the community--does have limitations--the client must be willing." (Public, Head Start affiliate)

As these statements reveal, the philosophy of the sponsoring agency or group toward social services is strongly reflected in the day care centers which they operate. In general, churches, YWCA's and special Federal programs (such as Community Action Agencies) feel more responsibility for providing social work services than other non-profit day care corporations or profit centers.

1.4.3 Transportation

As is shown on Table 1.14, 17% of the centers sampled in Washington regularly provide transportation to and from the center. This is a larger proportion than the 10% Regional average. The Regional profile revealed that the transportation which was provided was almost always provided by Head Start affiliates and other publicly funded centers.

In conclusion, in Washington State and the Region as a whole, the only centers which can afford to provide what would be called comprehensive services to children, such as health, social and psychological services and transportation, are those which operate on something more than reasonable parent fees--public and private, non-profit centers. In addition, it is the latter centers which take a greater responsibility for arranging for these services which are available at little or no cost in the community through some other Federal, state or local programs.

1.5 A DESCRIPTION OF WASHINGTON'S DAY CARE PROVIDERS

Providing child care requires an enormous amount of energy and effort. Creating an atmosphere which fosters the growth and security of children eight to 14 hours a day, five days a week, can by physically and emotionally strenuous, though rewarding. It is of interest to look at the characteristics of the considerable number of women and the few men who have chosen to provide care for children as an occupation. As an introduction, Tables 1.15, 1.16, 1.17 display Washington providers' ages, the number of men and women working in day care, and the years they have been working in the field.

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TABLE 1.15
AGE OF CHILD CARE PROVIDERS

Age Groups	Center Staff (n= 254)	Family Day Care Providers (n=130)	In-Home Care (n=112)
Under 18	0	0	5%
18-25	42%	11%	32%
26-34	14%	34%	29%
35-44	23%	20%	15%
45-54	16%	22%	8%
55-64	5%	12%	8%
65 years or older	0	1%	3%
Total	100%	100%	100%

TABLE 1.16
SEX OF CHILD CARE PROVIDERS

Sex	Center Staff (n=278)	Family Day Care Providers (n=130)	In-Home Provider (n=112)
Women	88%	100%	100%
Men	12%	0	0

TABLE 1.17
LENGTH OF TIME WORKING IN THE FIELD OF DAY CARE

Time in the Field	Center Directors (n=25)	Family Day Care Providers (n=130)	In-Home Provider (n=112)
Less than one year	4%	22%	43%
One to two years	28%	28%	27%
Two to five years	24%	36%	17%
Five to ten years	24%	11%	11%
More than ten years	20%	0	2%
Total	100%	97%	100%

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As Table 1.15 shows, different care settings attract different age groups. Forty-two percent of all center staffs and 37% of all in-home providers in the Washington sample are 25 years old or younger--close to the Regional average. This contrasts with the 11% of family day care providers who are 25 years old or younger. Fifty-four percent of family day care providers--many of whom care for their own children along with the children they take in for care--are between the ages of 26 and 44. This same phenomenon occurs across the Region where an average of 14% of family day care providers are 25 years old or younger and 55% are between 26 and 44.

Day care is almost exclusively a woman's occupation in Washington and across the Region (Table 1.16). Only 12% of all center staffs sampled in Washington and only 11% in the Region as a whole, are men. No family or in-home providers in Washington were men, and only one man provides in-home care in the Region. This reflects the traditional low status of child care as an occupation for men. In addition, the income derived from child care is quite low for household heads, although women who are heads of households work in the field.

About 44% of the center directors surveyed in Washington have been working in their field of day care for five years or longer, and another 24% have been in the field from two to five years (Table 1.17). A substantial 32% of the center directors have worked in day care for two years or less, a slightly higher proportion than the Regional average of 29%. Those directors with the longest experience in the field are primarily the operators of the oldest form of day care, the private, for-profit centers, which they have operated for several years.

Fifty percent of the family day care providers and 70% of the in-home providers sampled in Washington have worked as day care providers for less than two years (Table 1.17). This represents a lower proportion of providers in each of the categories than the Regional average--56% of family day care providers and 88% of in-home providers Regionally have worked in day care for two years or less. This may be interpreted as reflecting a lower turnover rate and a slightly more stable population of home care providers in Washington than is average for the Region. This conclusion is supported by the additional fact that 36% of Washington's family day care home providers and 17% of the in-home providers have been providing care for from two to five years, while the Regional average for each of these categories is 24% and 12% respectively.

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1.5.1 Factors in Caregiver Selection: Previous Education, Training, and Work Experience

Although it is common for centers to select staff on the basis of their formal educational qualifications, the national study by Abt Associates* found no correlation between formal education of staff and the "warmth" of the centers. This finding does not suggest that formal training has no impact on a day care center program; rather, that formal training is not a sufficient index to predict a "warm" center atmosphere. Findings such as these have influenced the current emphasis on competency-based training such as is offered in Child Development Associate programs.

Unlike the center staff selection process, the state procedures for licensing or certifying family and in-home day care providers do not involve screening on the basis of educational background, but rather, the provision of references who confirm a provider's competence to care for children.

In contrast with the very few family and in-home providers who have a college degree, a large proportion (52%) of Washington's center directors had an undergraduate degree, and another 13% had a two-year Associate Degree, primarily from European colleges which have offered such a degree longer than have United States schools (Table 1.18).

Paralleling the national profile of center director education described by M. D. Keyserling, public and private, non-profit center directors were more likely to have one or more academic degrees than directors of private-profit centers.** Interesting also is the wide variety of academic backgrounds represented in the sample (Table 1.20). Of the center directors interviewed in Washington, 13% had a Bachelor's Degree in either Child Psychology or Education, another 13% had a two-year Associate Degree in Early Childhood Education. The proportion of Washington center directors with academic backgrounds related to Early Childhood Education is smaller than the average for the Region--35%--although the number of directors with two-year Associate Degrees specifically in Early Childhood Education was greater than the Regional average--5%.

Table 1.19 displays responses by family and in-home providers as to the informal training they have had for working with

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*A Study of Child Care, 1971-72, Abt Associates, 55 Wheeler St., Cambridge, Mass., April, 1971.

**Mary Dublin Keyserling, Windows on Day Care (NY: National Council of Jewish Women), 1972, p. 95.

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TABLE 1.18
FORMAL EDUCATIONAL BACKGROUND
OF PROVIDERS RESPONSIBLE FOR CHILD CARE
PROGRAMS

Years in School	Center Directors (n=23)	Family Day Care Providers (n=130)	In-Home Provider (n=112)
Less than twelve years	0	35%	25%
High school graduate/ GED	26%	35%	41%
Some college or vocational education	9%	27%	32%
Two year degree/AA	13%	0	0
College graduate	52%	3%	2%
Master's degree	0	0	0
Other	0	0	0

TABLE 1.19
PERCENT OF HOME CARE PROVIDERS
WITH TRAINING RELATED TO WORKING WITH CHILDREN,
AND THE SOURCE OF TRAINING

Training	Family Day Care Providers (n=130)	In-Home Provider (n=112)
Yes, have had training	52%	46%
Training Source:		
In School	30%	36%
Church	25%	8%
Scouts/4H	27%	16%
Other special child development classes	15%	8%
By being a mother	12%	14%
Other	13%	18%

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TABLE 1.20
A PROFILE OF SAMPLED CENTER DIRECTORS' FORMAL EDUCATIONAL BACKGROUNDS IN WASHINGTON

Center Directors' Degree/Major	(n=23)
Master's Degree	
--	--
Bachelor's Degree	
Nursing	1
Literature	1
Child Psychology	1
Psychology	2
Social Work	1
Education	2
Sociology	2
Art	1
Theology	1
Associate/2 yr. Degree	
Early Childhood Education	3
Some College	2
High School/GED	6
Less Than High School	-

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children. Fifty-two percent of the family day care providers and 46% of the in-home caregivers said that they have had some training or experience related to working with children either in school, church, through Scouts, or 4-H, other special child development classes or experience with their own children. This roughly parallels the Regional average for family day care providers (43%) and in-home caregivers (45%).

At present the majority of home caregivers are women who do not have much experience in other occupations. They do not have the formal education to prepare them for other occupations (Table 1.18), and in many instances, they have not recently worked outside of the home (Table 1.21). Many of the family day care providers expressed a lack of confidence to work in other occupations outside of the home because of their lack of prior experience. Most of the family day care providers seemed secure in providing care for children and many preferred to stay home and take care of their own children. Providing day care in their homes made it possible to have a small income while staying home with their own children. The greater satisfaction of family day care providers with their occupation than in-home caregivers reflects this preference. Twelve percent of Washington's family day care providers sampled said they would rather be doing something other than providing child care, while 30% of the in-home caregivers would prefer to be doing something else. This is a slightly lower percentage than the Regional average, 19%, for family day care providers and near the Regional average, 31%, for in-home providers.

Table 1.22 displays the major reasons given by the providers in the various settings for undertaking child care as an occupation. The majority of center directors entered care by taking another job in a day care center and becoming interested in providing center care as a profession. Family day care providers expressed a variety of reasons, among which were reasons relating to the need for care and companions for their own children. In-home providers, on the other hand, began providing care as a favor for a friend or relative, because they liked to work with children and, primarily, because they needed the income. Many in-home providers are women who have been out of high school for only a short while and have not been able to find another type of job. Another major category are the parents or other relatives of the parent seeking care who have agreed to provide care as a favor. Neither looks to in-home care as a permanent source of employment.

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TABLE 1.21
HOME CARE PROVIDERS' PREVIOUS JOB EXPERIENCE AND ATTITUDES ABOUT PROVIDING CHILD CARE

Would you rather be doing something other than providing child care?

	Family Day Care Homes	In-Home Providers
Yes	12%	30%

What were you doing before you began operating a day care home or providing in-home care?

	Family Day Care Homes	In-Home Providers
Working	41%	25%
Unemployed	59%	75%*

*13% were in school/training.

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TABLE 1.22
HOW PROVIDERS ENTERED CHILD CARE

Major Reason For Choosing to be a Child Care Provider	Center Directors (n=25)	Family Child Care Providers (n=129)	In-Home Provider (n=112)
College preparation	12%	--	--
Took a job in a center and liked it	44%	--	--
Like to work with children	8%	36%	29%
Referred to a vacant position	12%	--	--
Needed care for my own children	4%	22%	--
Needed the income	--	47%	45%
Wanted companions for my own children	--	15%	--
Did it as a favor for a friend or relative	--	14%	15%

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1.6 PROVIDERS' WORKING CONDITIONS

1.6.1 Staff/Child Ratios

The 1971 study by Abt Associates of exemplary child care programs, concluded that staff/child ratios provide a key indicator of the "warmth" of the center.* The Abt study noted that centers that had lower ratios of staff to children, e.g., 1:3 to 1:5, provided a "warmer" atmosphere of interaction than those with higher ratios. This finding is corroborated by the work of Elizabeth Prescott** and June Solnit Sale*** in the family day care situation. Sale finds that three to five, depending on the family day care provider, is evidently the optimal number of children, particularly when one or more is an infant or toddler. Above that, the individual child gets lost in the shuffle, and below it, he may receive too little stimulation. Sale also makes an interesting point, which UNCO's field experience confirms, namely that most of the family day care providers are aware of their own limitations and are self-regulatory in the number of children they care for. This may result in their caring for fewer children than they are licensed for, or feeling frustrated by their licensed limitation on the number of children for which they can provide care.

TABLE 1.23
AVERAGE STAFF/CHILD RATIOS IN
WASHINGTON DAY CARE SETTINGS

	Centers	Family Day Care Homes	In-home Care
Average ratio of adult/children	1:10	1:4.2	1:2.5

*Abt Associates, Op. Cit.

**Prescott, E. and E. Jones. An Institutional Analysis of Day Care Programs, Part II, Group Day Care: The Growth of an Institution, (Pasadena, Calif.: Pacific Oaks College, 1970).

***Sale, June Solnit. Open the Door...See the People, (Pasadena, Calif.: Pacific Oaks College, 1972) p. 24.

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If Abt, Sale and Prescott are right, then the family day care setting in Washington more frequently provides the optimal staff/child ratio than does the typically higher ratio center setting and lower ratio in-home situation.

1.6.2 In-service Training Opportunities for Providers

Recent studies report that formal training is not necessarily a good index of a caregiver's potential or competence. One study noted that informal measures of interest and socially agreeable personality traits assessed by interviews appeared more promising.* In the Pacific Oaks project, they found the trait, "eagerness to learn", to be more valuable than "formal training" in helping family care providers provide quality care.**

A provider's willingness to learn is not enough to assure quality care, there must be opportunities available where learning can take place. The experience of the Massachusetts Early Education Project suggests that the availability of a good in-service training program is at least as important as the staff's formal educational background.

> "In child care, it seems to be important for staff to have opportunities to share and reflect on their experiences in the center together; to learn new activities, and to find answers to their questions about the children"***

If, indeed, the availability of opportunities for caregivers to share their experiences on a regular basis is an important element in assuring quality care, then family day care and in-home providers are categorically at a disadvantage in Washington State due to their isolation from other persons providing child care and their lack of ongoing in-service help.

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*Codori, Carol, and John Cowles, "The Problem of Selecting Adults for a Child Care Training Program: A Descriptive and Methodological Study", Child Care Quarterly, Vol.1, No.1, Fall, 1971, pp. 47-55.

**Sales, Op. Cit., p. 13.

***"Child Care in Massachusetts: The Public Responsibility", Massachusetts Early Education Project, Richard Rowe, 1972. Reprinted by DCCDCA, p.52.

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In Washington centers sampled, 40% of the directors said that they have formal in-service training for their staff members, about 4% more centers than the Regional average (Table 1.24). The Regional profile revealed that most of the formal, in-service programs were conducted by public (57%) and private, non-profit (47%) centers rather than private, for-profit centers (9%).

Fifty-two percent of the centers hold staff meetings at least once a week and 84% of the Washington center directors said that their staffs had available to them other outside training such as workshops and special consultants--a considerably higher percentage than the Regional average of 69%.

Twice the proportion of center operators in Washington than the rest of the Region said that the agency which administers the Federal funds has offered some staff training. Forty-one percent of Washington centers sampled have been offered some training by the state or local administering agency, as compared with an average of 19% for the other three states in the Region.

1.6.3 Working Hours and Benefits

The hours which day care providers work, particularly the home care providers, is a subject which deserves considerably more attention than it has received. In centers it is possible to try out different staffing patterns and ways of grouping children. Unpaid volunteers and students often are used to relieve or supplement staff. Staff in centers may be scheduled so that they have some time to themselves each day or have an opportunity to participate in staff meetings, training or activity sessions. In in-home care and family day care home situations, it is rare that a provider has anyone nearby to relieve her/him when the provider needs time to her/himself or wishes to improve skills through training. Further, while center staff can arrange schedules to avoid overly long days, Washington in-home and family day care providers' typical day and unrelieved schedule averages at least 10 hours per day for five or more days per week (Table 1.25).

TABLE 1.25
AVERAGE NUMBER OF HOURS PER DAY THAT CAREGIVERS PROVIDE CARE FOR CHILDREN

Centers	Family Day Care Homes	In-Home Care
11	10	10

Although day care center staff, except most center directors, work eight hours a day or less, the salaries and fringe benefits which they receive are considerably less than those of teachers in public systems. The average benefits received by

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TABLE 1.24
ON-THE-JOB SUPPORT AVAILABLE TO DAY CARE CENTER STAFFS

	Centers (n=25)
Center Director is a person with a college level specialty in early childhood education, child development, or child psychology.	16%
Center has in-service training program for caregiver staff:	
Formal in-service training	40%
Informal in-service training	40%
TOTAL:	80%
Frequency of center staff meetings:	
At least once a week	52%
Every two weeks	12%
Monthly	20%
Unscheduled	12%
General staff meetings not held	4%
TOTAL:	100%
Other outside training is offered to staff (e.g., consultants, workshops, etc.).	84%
Agency which administers Federal funds has offered staff training.	41%
Center staff has paid leave for staff training outside the center.	48%
Staff members are given first aid training:	
Yes, all staff	46%
Yes, selected staff	33%

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TABLE 1.26
EMPLOYEE BENEFITS

	Percent of Centers Whose Employees Receive Benefits (n=25)
Workman's Compensation	84%
State Unemployment Insurance	68%
Health Insurance	52%
Life Insurance	28%
Retirement Program	16%
Paid Vacation	52%
Paid Sick Leave	64%
Paid Leave for Staff Training	48%
Tuition Assistance	44%

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day care center staffs in the sampled Washington centers are displayed in Table 1.26. Fifty-two percent of the employees in Washington centers sampled have paid vacation and just 64% have paid sick leave. This is comparable with the Regional average. The Regional profile revealed that employee benefits were better in public and private non-profit centers receiving public money than in private, for-profit or non-subsidized, non-profit centers. In the Region as a whole 79% of the public center employees, 58% of the private, non-profit center employees and 39% of the private, for-profit center employees got a vacation with pay. Again, Regionally, 79% of the public center employees, 69% of the private, non-profit center employees and 30% of the private, for-profit center employees receive paid sick leave.

1.7 PARENT INVOLVEMENT IN WASHINGTON STATE DAY CARE

1.7.1 Day Care Centers

Given the large number of children served in a day care center--from 12 to more than 100--it is more difficult for center staff and parents to maintain the informal relationships which characterize the home care settings. Tables 1.27 and 1.28 profile parent relations with centers. Forty-eight percent of the centers have a parent council or advisory board; the highest proportion of any of the states in the Region. The primary function of all of these advisory groups is setting policy.

Informal conferences with parents either at pick-up or drop-off time as is requested by the parent or caregiver are the major ways that regular communication with parents is maintained (Table 1.28). Eighty-four percent of the centers permit parents to visit and observe their children in care; 39% have parents as staff and 52% use parent volunteers. The Regional profile revealed that public centers, which frequently have parent involvement guidelines, involve parents formally--in advisory boards, as staff--considerably more than private, for-profit centers.

Many day care centers have problems which stem from their financial situation. These problems may strain parent/center relations. The Washington centers listed their three major operating problems as "inadequate or limited resources", 72%; "staff problems", 68%; and "inadequate facility or equipment", 28% (Table 1.29). These problems occur Regionally in slightly less proportion--"inadequate or limited resources", 60%; "staff problems", 57%; and "inadequate facility or equipment", 23%.

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TABLE 1.27
A PROFILE OF CHILD CARE CENTER RELATIONS WITH PARENTS

Percent of Centers With Federally Funded Children Which Have Formal Parent Involvement

	Centers (n=24)
Parent Council/Advisory Group	48%
Parents on Center or Agency Board	39%
Parents Hired as Staff	39%
Parent Volunteers	52%
No Formal Parent Involvement	22%

Functions of Parent Advisory Groups in Centers Which Have Them

	Percent of Advisory Groups
Screen and Hire Center Director	48%
Screen Other Staff Applicants	32%
Advise Staff in Program Planning	36%
Provide Volunteers, Supplies, etc. to Center	44%
Periodically Evaluate Center Program	44%
Review and Approve Applications for Federal Funds	32%
Review Parent Grievances	36%
Organize/Sponsor Training for Parents	13%
Set Center Policy	100%

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TABLE 1.28
CENTER RELATIONS WITH PARENTS (contd.)

Parent Conferences
(n=23)

	Percent of Centers
Informal/Unplanned (i.e., at pick-up or drop-off time)	65%
Formal Group Conference - less than one/month	0
Formal Group Conference - at least one/month	30%
Individual Parent Conference - less than one/month	13%
Individual Parent Conference - at least one/month	13%
Individual Parent Conferences as requested by parent or caregiver	61%

Informal Parent Involvement
(n=23)

	Percent of Center Directors Responding "Yes"
Are parents encouraged to visit, observe, and participate in care at center?	84%
Is there a bulletin board or newsletter to inform parents of center schedule, program changes, etc.?	88%
Is there a suggestion box or other mechanism available to parents to make suggestions, etc.?	44%
Do you have outside social contacts with some of the parents of children enrolled in the center?	76%
Can you think of any specific changes that have occurred as a result of parent involvement?	48%
Do you have any written parent grievance procedure?	10%

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TABLE 1.29
THREE OPERATING PROBLEMS MENTIONED MOST FREQUENTLY BY CENTER DIRECTORS

Problems	Center Directors (n=25)
Inadequate or limited resources	72%
Inadequate facility or equipment	28%
Staffing problems	68%

TABLE 1.30
MAJOR PROBLEMS IN CENTER-PARENT RELATIONS

Problem Areas	Percent of Directors Mentioning it as Problem (n=25)
Late payment of fees	30%
Late pick-up	29%
Different ideas on discipline	12%
Bringing sick children for care	32%
Lack of notification of absences	44%

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As one private center director expressed the problem,

> "Working mothers in the area make low salaries and cannot afford to pay for the quality of care needed. Overhead costs--staff salaries, equipment replacement, building upkeep, taxes, insurance, food are all to expensive."

The major problems which center directors had in relationships with parents related to center financing problems--44% of the centers had problems with parents who did not notify them of children's absences and 30% had problems with late payment of fees (Table 1.30).

1.7.2 Family Day Care Homes

Family day care homes and in-home care situations far more than center care, are built on personal relationships between parents and the child care providers. Parents tend to be directly involved on a daily, informal basis with providers (Table 1.31).

The major source of friction between family day care providers and parents were things which caused the provider inconvenience--late payment of fees, late pick-up of children, not notifying the provider if the child was to be absent.

1.7.3 In-home Providers

In-home providers are unique in that they care for children from any one family. As a result, relationships between providers and parents usually are close. Seventeen percent of the in-home providers in Washington are relatives of the children they care for, a smaller proportion than the Regional average, 30% (Table 1.32).

Among the added benefits which a parent receives from an in-home care provider are some homemaker-type services: 36% of the caregivers do some light housework--25% cook for the family of the child in care (Table 1.32).

A particular strength of the in-home care setting is the low incidence of parent/provider problems (Table 1.30). Although parents reported considerable difficulty in finding good and reliable in-home providers, once this was accomplished, few were dissatisfied with their in-home situation (Table 1.33).

TABLE 1.31
A PROFILE OF FAMILY DAY CARE PROVIDERS'
RELATIONS WITH PARENTS

67% of the family day care mothers interviewed said they were well acquainted with all of the parents whose children they cared for. Another 29% said they knew some of the parents well, while only 5% felt they knew none of the children's parents.

67% of the day care mothers estimated that they spend from 10-30 minutes each day with the parents of the children they care for. Only 0% do not spend some time with parents each day.

67% of the family day care mothers say they encourage parents to visit, observe and participate in the care of their children.

94% of the family day care providers make a point to discuss their concerns about the child's development or behavior with parents.

The following were the major problems which family day care providers experienced in relations with parents:

	Percent of Providers Naming Problem
Late payment of fees	38%
Late pick-up time	19%
Different ideas in discipline	8%
Bring sick children for care	14%
Don't notify if going to be absent	18%
No problems at all	

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TABLE 1.32
A PROFILE OF RELATIONS BETWEEN IN-HOME PROVIDERS AND PARENTS

17% of the in-home providers caring for children with Federal funds are relatives of the children.

62% of the in-home providers care for the children in the parents' own home.

84% of the parents located and hired the in-home provider themselves rather than being referred by an agency.

In addition to their child care services to parents, those providers who work in the parents' home provide the following homemaker-type services routinely: (n=91)

Light housework	36%
Cooking for the family	25%
Heavy cleaning	6%
Laundry and/or ironing	8%

The following were in-home providers' major problems in relations with parents: (n=110)

	Percent of Providers Naming Problem
Late payment of fees	16%
Work hours	5%
Different ideas on discipline	4%
Other miscellaneous	14%
No problems	72%

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TABLE 1.33
PARENT SATISFACTION WITH THEIR IN-HOME CARE SERVICES
(n=87)

62% of parents said they were very satisfied with their present in-home sitter services. 28% were satisfied, and 10% were not satisfied.

If you had a choice of types of care for your infants or pre-schoolers, what three types would be your preferences?

	1st	2nd	3rd
1. A sitter in my home (relative)	22%	21%	12%
2. A sitter in my home (non-relative)	13%	23%	21%
3. Headstart	11%	11%	19%
4. A day care setting with more than 12 other children	6%	8%	11%
5. A day care setting with fewer than 12 other children	5%	21%	24%
6. Would prefer to stay home and care for my infant/pre-schooler	42%	12%	12%
7. Other	2%	5%	2%

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Sixty-two percent of the parents using in-home care in Washington were "very satisfied" with their situation, while 10%--the Regional average--were "not satisfied".

When parents were asked to choose the type of day care out of all possible types they would prefer for their pre-schoolers, the greatest percentage--42%--said they would prefer to stay home and care for the infant/pre-schooler. The next largest proportion--35%-- said they would prefer either a relative or non-relative sitter in their own home (Table 1.33).

1.8 SUMMARY OF PROVIDER PROBLEMS

1.8.1 Center Problems

The overriding problem mentioned by day care center directors was a lack of adequate funds to do what they feel should be done in order to provide high quality care for children. Although the directors' opinions about what constitutes high-quality care differ, a strong concern about quality care was universal.

The lack of money to hire what they feel is an adequate number of staff, or to be able to pay enough to keep good staff members when they have them, frustrated most directors interviewed.

Non-profit centers encounter many problems resulting from their sharing facilities with other organizations; and directors were discouraged by their inability to afford facility improvements and large equipment for these programs.

Many directors mentioned the need for good in-service staff training and more help with developmental aspects of care in their programs. Again, staff time constraints--related to money constraints--stand in the way.

In general center directors were very understanding about the financial problems facing the low and middle income employed parents whose children were in their centers. This sensitivity made the directors' own problems over their inability to afford a more adequate program even more frustrating.

The directors interviewed, whose programs all receive some percentage of their operating expenses from state and Federal sources, did not extend their compassion to the state or

Federal bureaucracy which consistently made late payments, held up grants, or withdrew formerly available funds.

The unpredictability of funds--from whatever source--is a major stumbling block in the planning and delivery of quality child care.

1.8.2 Home Care Problems

Family day care home providers also mention the unpredictability and inadequacy of income as a major problem, whether the responsibility for payment is the state welfare department's or the parents. Several providers expressed their feelings that when they call the welfare office to inquire about a long overdue payment, they are treated as though they are unreasonably impatient. This discourteousness of the administering agency payment staff was often discussed in Washington, where late payment problems were mentioned most frequently.

Parent-related problems also caused concern, particularly when parents were not reliable about drop-off or pick-up times, notifying providers when children are to be absent, not supplying adequate clothing or diapers, etc. Generally the family day care providers have children of their own and when the parents of children in care are not reliable, this adds to the provider's burden during her already long day (average 11 hours). The unrelieved 11 or 12 hour day of providing child care leaves little enough time for the provider's own errands and family concerns. As suggested earlier, a system of homes with a floating relief staff person would be a great help to these providers in arranging their personal time.

There is a serious need for low-cost liability insurance to be available to all home care providers. The potential for lawsuit against these primarily unprotected providers is very real. Such coverage should be mandatory and made available through a low cost group plan.

The myriad of personal parent problems with which home care providers are faced suggest that there is a need for closer relations between the caseworkers, providers, and parents. Many problems with schedules, late emergencies, child custody battles, etc. must be handled by the provider. There should be a caseworker available to the provider and parent to relieve this burden.

When a provider is not paid because a parent has not reported to work or training or because of state delays in payment, a formal grievance procedure should be available. This procedure should be developed by the states for the benefit of all day care providers who are paid by the state for child care.

Often home care providers have questions on some aspect of child care or about how to handle certain behaviors. They would like to have some help with these questions, but there is no training or on-the-spot assistance available to them. Few home providers perceive the caseworkers as a resource for questions they have about child care.

In summary, the linkages between the state licensing agency and home care providers are weak. There is little support or assistance given providers after licensing. Areas which need state attention are state payment systems, small business counseling for providers, improved casework services to parents, provider grievance procedures, and provider training.

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